Sava	YAND GENERA	1 LLECTIONS			State of New
27109 (VULLEN 1755) ididate's Name(print) Office				District (if applicable)	
			O. I		
ilian adduses	NADY	UALDE	<u>Spark</u>	61434	357-34
aing address	(include city and kip	coae)	1	Telepho	ne Number
,	Report Period Be Report Period Beg	NUMBER 1 - D gan: December 17, 199 ran: December 21, 199 ran: December 19, 199	4, for an office wi 6, for an office wi	th a six year terr th a four year ter	m s
	•	Report Period Ends:	August 23, 2000		20
C: of unspent co	ash on hand from prontributions report), i	revious campaign (sho f any	uld equal the balar	ice shown on yo	ur last disposition
	C	ONTRIBUTIONS SU	MMARY	,	
1. Total An	nount of contribution	s in excess of \$100		8/26	.00
2. Total am	ount of contributions	of \$100 or less			
Actual m	umber of contributior	ns of \$100 or less			
3. Interest and income earned, if any					
4. TOTAL	AMOUNT OF ALI	CONTRIBUTIONS			
(add line	es 1 through 3)		,	\$ 126	<u> </u>
		EXPENSES S	SUMMARY		
5. Total amount of expenses in excess of \$100			\$ 126.00		
6. Total am	ount of expenses of S	100 or less			
7. Expense for filing fee				\$ 100	603
8. TOTAL AMOUNT OF ALL EXPENSES				di-	
	es 5 through 7)			- ¥226	-00

Prescribed by Secretary of State NRS 294A.120, 294A.200 EL201.001(rev. 04/00)

Total number of pages for this report